





DELTA TOWNSHIP ATHLETIC REGISTRATION FORM - Please use one form per person. Feel free to make copies.


PARTICIPANT'S NAME	HOME PHONE	CHILD'S DOB	M/F
STREET	WORK PHONE	<input type="checkbox"/> MEDICAL CONDITION? (Attach brief explanation)	
CITY, ZIP	PERSON'S NAME AT WORK PHONE		
IF YOU WOULD LIKE TO RECEIVE NOTICES OF UPCOMING EVENTS VIA EMAIL, PLEASE PROVIDE YOUR EMAIL ADDRESS:			

	EVENT NAME	REGISTRATION INFORMATION	COST
<input type="checkbox"/>	2005 PITCH, HIT & RUN Deadline: April 29, 2005 Ages 7-14 as of July 17, 2005	Age is determined using the date of birth provided at the top of this form. Participants that advance will be required to provide a copy of their birth certificate.	- 0 -
<input type="checkbox"/>	2005 BOYS BASEBALL - \$22 Deadline: May 6, 2005 Ages 7-9 as of June 13, 2005 <i>Cost after 5/6/05 if availability: \$32</i> 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach my child's team. If yes, name:	
<input type="checkbox"/>	2005 GIRLS SOFTBALL - \$22 Deadline: May 6, 2005 Ages 7-11 as of June 13, 2005 <i>Cost after 5/6/05 if availability: \$32</i> 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach my child's team. If yes, name:	
<input type="checkbox"/>	2005 COED TBALL - \$22 Deadline: May 6, 2005 Ages 5-6 as of June 13, 2005 <i>Cost after 5/6/05 if availability: \$32</i> 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach my child's team. If yes, name:	
<input type="checkbox"/>	2005 FALL SOCCER - \$22 Deadline: July 15, 2005 Ages 4-10 as of December 1, 2005 <i>Cost after 7/15/05 if availability: \$32</i> 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach my child's team. If yes, name: <input type="checkbox"/> 4 on 4 <input type="checkbox"/> 10 on 10 (actually 7x7, 8x8, 10x10, 11x11)	

 Phone: (517) 323-8555 Internet: www.deltami.gov/parks Make checks payable to: Delta Township

Mail to: Delta Township Parks and Recreation, 7710 West Saginaw Hwy, Lansing 48917

Applications must be received by the posted deadline, not postmarked by then. No special requests will be honored.

☐  Programs with this symbol require a blue and white reversible shirt. If your child needs one, please select a size and enclose an additional \$10. XS S M L XL (all sizes are adult) - \$10

Parent/Guardian or Adult Participant Waiver, Release of Liability & Consent Agreement

I understand that the Delta Township Parks and Recreation Department and its program co-sponsors thereof, are in no way responsible for any injury that may be incurred by myself or my child while participating in the program(s) I have registered for and agree to hold the above harmless for injury and damages in return for such participation.

Parent/Guardian or Adult Participant Signature _____

Please Print Name _____

TOTAL

DATE RCVD

RECEIPT #

SHIRT RECEIVED?

OFFICE USE ONLY

☐ Yes ☐ No